

**TOBACCO USE PREVENTION AND EDUCATION PROGRAM
EVALUATION REPORT**

January - June 2000

MONTANA OFFICE OF PUBLIC INSTRUCTION

September 2000

**Submitted to:
Montana Office of Public Instruction
HIV/STD Education Program
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I. INTRODUCTION

The Montana Tobacco Use Prevention and Education Program of the Office of Public Instruction (OPI), through an interagency agreement with the Montana Department of Public Health and Human Services (DPHHS), provides assistance to schools in Montana in organizing and delivering tobacco use prevention and education programs. The major emphases of the program will be policy and curriculum development in local schools; providing district-level training to develop knowledge, confidence, competency, and skills among teachers so that they can provide effective tobacco use prevention education at the classroom level; and assessing current student risk behaviors with respect to tobacco use.

In January 2000, the Tobacco Use Prevention and Education Program at the OPI was created. Program activities included developing program priorities, work plan activities and timelines, and program evaluation plans. Initial work also included developing a grant program to provide pass-through grant funds to Montana schools for tobacco use prevention and education. Program activities specific to teacher training focused on education for regional trainers who, in turn, will offer training to local teachers on tobacco use prevention education. Student tobacco use assessment was also addressed using a Student Use and Perception Survey.

In January 2000, the OPI contracted with Dodge Data Systems, Inc., of Helena to provide survey and evaluation services. A major emphasis of the contract was to evaluate the Tobacco Use Prevention and Education Program. As part of the contracted evaluation, this report details the methods used to evaluate the program, the results of the evaluation process, and recommendations for changes within the training program. Appendix A contains the results of the pretest/posttest surveys related to knowledge inventory, ability inventory, and prevention education barrier inventory administered to the

II. PROGRAM EVALUATION

The Tobacco Use Prevention and Education Program began in January 2000. This program evaluation will cover the six-month period from January 1 through June 30, 2000. The evaluation will consist of a review of work activities accomplished during the six-month period in relation to the goals and objectives of the program as well as a formative evaluation of the teacher training activities.

A. Program Objectives and Goals

Key educational objectives of the Tobacco Use Prevention and Education Program are to expand and strengthen the capacity of local education agencies and schools to: (a) implement effective, age-appropriate tobacco use prevention education; and (b) adopt and enforce tobacco-free policies. The priority elements of the Tobacco Use Prevention and Education Program's goals for achieving their objectives include:

- **Policy:** Promote the adoption of tobacco-free school policy consistent with CDC guidelines and provide collaborative strategies for implementing and enforcing the policy. A tobacco-free school policy would include a ban of all tobacco products on school campuses; a clear no-use and no-possession statement at all times for all students, and a clear no-use statement at all times for all staff and other individuals visiting or using the school or any of its property; a ban on tobacco advertising on school property, at school functions, or in school publications; enforcement provisions for violation of the policy; and support for classroom-based instruction on tobacco use prevention, including training for teachers whose instructional duties include tobacco use prevention content.
- **Curriculum:** Assist local education agencies in implementing planned, sequential, skills-based curriculum as part of the comprehensive health enhancement curriculum. The tobacco content of the curriculum should conform to accepted practice guidelines (as described in CDC's *Guideline's for School Health Programs to Prevent Tobacco Use and Addiction*) and have credible evidence of effectiveness in impacting the tobacco use behaviors of young people.
- **Teacher Training:** Provide staff development/training for teachers to acquire the skills needed to effectively deliver skills-based tobacco use prevention education.

III. RECOMMENDATIONS

Recommendations that program staff should consider for maintaining the effective elements in the teacher training program and for improving other program elements include the following:


1. Evaluate regional teacher training workshops using an assessment instrument which measures knowledge, ability, and barriers.
2. Evaluate the regional trainers through on-site observation by the OPI staff using an evaluation tool specifically designed for this purpose.
3. Provide effective tobacco use prevention education and skills-based training to teachers that emphasizes behavioral decisions and provides participants with adequate opportunities to practice educational strategies that are effective in getting students to avoid tobacco use.
4. Provide fiscal and technical information support to the regional tobacco use prevention trainers throughout the school year.
5. Continue efforts for effective tobacco use prevention education that is incorporated into comprehensive and coordinated school health education.
6. Continue to assess and address perceived barriers to tobacco use prevention education in Montana schools.
7. Facilitate the development and implementation of appropriate tobacco-free school policies at the district level. These policies should include a ban of all tobacco products on school campuses; a clear no-use and no-possession statement at all times for all students, and a clear no-use statement at all times for all staff and other individuals visiting or using the school or any of its property; a ban on tobacco advertising on school

1999-2000 TOBACCO USE PREVENTION EDUCATION EVALUATION KNOWLEDGE INVENTORY FREQUENCY DISTRIBUTIONS


NOTE: The following frequency distributions are based upon surveys completed by 17 trainees who attended the Tobacco Use Prevention Education Program's workshop in June 2000. Percentages may not total 100 percent due to rounding.

Q-1 Please circle the appropriate number to indicate your knowledge level in the listed areas before and after this workshop (1 is a low knowledge level; 5 is a high knowledge level).

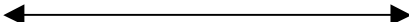
A) Tobacco terminology

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	37.5%	56.3%	6.3%	0.0%	0.0%
After Workshop	62.5%	37.5%	0.0%	0.0%	0.0%

B) Tobacco-related disease information

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	50.0%	43.8%	6.3%	0.0%	0.0%
After Workshop	50.0%	50.0%	0.0%	0.0%	0.0%

C) Tobacco chemicals

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	31.3%	56.3%	12.5%	0.0%	0.0%
After Workshop	43.8%	43.8%	12.5%	0.0%	0.0%

Student Tobacco Use and Perceptions

An Overview of Tobacco Use, Perception of Use and Intention to Use
Among Montana High School and Middle School Youth

Tobacco Use Prevention and Education Program
Office of Public Instruction

July 2000

Introduction

The Office of Public Instruction (OPI), under an interagency agreement with the Montana Department of Public Health and Human Services (DPHHS), provides technical assistance to Montana's schools for school-based tobacco use prevention and education. The purpose of the OPI's work plan is to expand and strengthen the capacity of local education agencies to (a) implement effective, age-appropriate tobacco use prevention education, and (b) adopt and enforce tobacco-free policies.

The priorities of Montana's school-based work plan are focused on the following eight areas: policy, curriculum, teacher training, classroom implementation, involving young people, cessation, data collection and evaluation. Under two of these priorities – data collection and involving young people – the work plan includes a student tobacco use and perception survey. The survey was intended to accomplish three objectives:

- (1) to complement the questions in the Youth Risk Behavior Survey regarding tobacco use health risk behaviors,
- (2) to establish a baseline data set of student perceptions about tobacco use among their peers, and
- (3) to establish a baseline data set of student intentions regarding their future use of tobacco products.

The questionnaire used to collect information on student perceptions about peer tobacco use and future intentions about personal tobacco use is included in this report as Appendix A. Hereafter in this report, this questionnaire will be referred to as the Student Tobacco Use and Perception survey (or the STUP survey). The frequency distributions of the data are included in Appendix B. These frequency distributions are presented for high school students and for middle school students. The results from the STUP survey are presented in the Findings section of this report.

Methods and Limitations

In April 2000 an informal, non-random survey of self-reported personal tobacco use, perception of tobacco use by others, and intent for future personal use of tobacco products was sent to a non-random group of teachers in Montana schools. These teachers provided the survey to middle school and high school students. Student participation was voluntary and all responses were anonymous. A total of 543 students in grades 6 through 12 participated in the survey (324 students in grades 6-8 and 219 students in grades 9-12).

The results in this report represent the responses from the students who elected to participate in the survey and should not be generalized to all Montana students.

Analysis of the survey results was limited to frequency distribution of total responses. No effort was made to cross tabulate the data elements or to disaggregate the data by grade or gender.

In the Student Tobacco Use and Perception (STUP) questionnaire, the questions about tobacco use by the respondent and the response options to those questions were taken from the Montana Youth Risk Behavior Survey. The questions about the respondent's perception of tobacco use by their peers were taken from a survey developed by the Montana DPHHS; however, the response options were created for the STUP. The questions and response options regarding future intentions were adapted from the DPHHS survey.

(Editorial Note: The STUP is intended to be given again as a follow-up survey. The results of the follow-up STUP are to be compared to the baseline STUP to reveal any changes in use, perception of use by others, or intent for future use. However, the response options for the perception questions in the follow-up STUP will be modified to provide more meaningful responses.)

Findings

The data from the survey can be grouped into three distinct areas, these being:

- ¸ self-reported personal tobacco use by the respondent,
- ¸ the respondent's perception of tobacco use by others, and
- ¸ the respondent's intentions for future tobacco use.

Tobacco Use By Respondent

Tobacco Use By Respondent Self-Reported Data <i>Source: Student Tobacco Use and Perception (STUP) Survey - OPI April 2000</i>				
<i>Response Item</i>	<i>1999 YRBS (High School)</i>	<i>2000 STUP (High School)</i>	<i>1999 YRBS (Grades 7-8)</i>	<i>2000 STUP (Grades 6-8)</i>
Ever smoked cigarettes	70.3	72.6	53.9	32.5
Current smoker (smoked on 1 or more of the past 30 days)	35.0	38.4	21.7	9.9
Frequent smoker (smoked on 20 or more of the past 30 days)	18.0	18.7	6.7	1.2
Ever used smokeless tobacco	---	38.4	---	12.7
Current user of smokeless tobacco (used on 1 or more of the past 30 days)	18.2	18.3	8.8	6.2
Frequent user of smokeless tobacco (used on 20 or more of the past 30 days)	5.0	8.2	1.4	0.6

Table Notes:

- 1 The YRBS for high school youth can be used to make inferences about the health risk behaviors of all high school-aged youth in Montana.
- 1 The STUP for high school youth represents 219 students.
- 1 The YRBS for grades 7-8 represents 6,656 students in grades 7-8.
- 1 The STUP for middle school youth represents 324 students in grades 6-8.

The STUP findings on tobacco use are consistent with the results from the 1999 Montana Youth Risk Behavior Survey (a statistically valid data set from which inferences about the health risk behaviors of all youth in the surveyed age range can be made). As shown in the table, the findings for high school-aged youth are similar between the YRBS and the STUP. For middle school students, the STUP findings indicate less involvement in tobacco use behaviors than do the YRBS findings. However, this is not surprising since the STUP includes students in grade 6 whereas the YRBS includes only students in grades 7 and 8.

Perception of Tobacco Use By Others

- Most (71.1 percent) Montana high school students think that their peers smoke cigarettes at a rate that is above the actual use rate. The actual use rate of cigarettes among Montana high school-aged youth is 35.0 percent (based on Montana YRBS "current" use). The perceived use rate ranged from 40 percent to over 80 percent.
- The STUP survey found that less than 10 percent of middle school respondents reported being a "current" smoker. But the perception among most (84.0 percent) middle school students participating in the STUP survey is that their peers are current smokers. Most middle school respondents perceived the use to range from 20 percent to 80 percent.
- Most (83.5 percent) Montana high school students think their peers use smokeless tobacco at a rate that is above the actual use rate. The actual use rate of smokeless tobacco among Montana high school-aged youth is less than 20 percent (based on Montana YRBS "current" use, it is 18.3 percent). The perceived use rate ranged from 20 percent to over 80 percent.
- The STUP survey found that less than 6.2 percent of middle school respondents reported being a "current" user of smokeless tobacco. But the perception among most (61.6 percent) middle school students participating in the STUP survey is that Montana middle school students are current users of smokeless tobacco. Most middle school respondents perceived the use to range from 20 percent to over 80 percent.

Personal Intentions for Future Tobacco Use

When asked, "When you are older, do you think you will use cigarettes or chewing tobacco, snuff or dip?" the STUP respondents answered as follows:

	<u>Yes</u>	<u>No</u>
- high school students	27.3%	72.7%
- middle school students	7.4%	92.6%

Summary

- ¸ Most Montana youth don't use tobacco products.
- ¸ Most Montana youth think that more of their peers use tobacco products than actually do use such products.
- ¸ Younger students display a stronger intention to not use tobacco products when they are older than do older students. But even among high school-aged students, nearly three out of every four students indicate their intention to not use tobacco products when they are older.

Recommendations

Although the Student Tobacco Use and Perception survey was an informal, non-random effort, its findings can provide a basis for several recommended actions. The recommendations are:

- Data on youth tobacco use, youth perceptions of peer use, and youth intention regarding future tobacco use need to be collected on a routine basis. The Montana Youth Risk Behavior Survey should be used for collecting data on youth tobacco use because the YRBS provides multi-year trend data on this health risk behavior for students in grades 7 through 12. The Student Tobacco Use and Perception survey should be slightly revised and used to collect perception and intention data.
- Informational efforts targeted toward youth on the actual non-use rate of tobacco use among youth need to be provided. These efforts are needed to get youth to understand that "most kids don't" use tobacco. By countering the erroneous perception that most youth do use tobacco and by providing skills-based prevention education, Montana's teachers and prevention specialists can provide young people the knowledge and the skills to not use tobacco.
- Prevention and education efforts need to be designed age-appropriately to build upon the strength and resolve indicated by middle school students in their overwhelming intention to not use tobacco products when they are older. Educational efforts must also be designed for older students to reinforce the "no use" messages they were given as younger students and to take advantage of their strong intention to not use tobacco products when they are older.
- Montana youth who do not use tobacco should play a role in the youth-focused informational efforts designed to reinforce the reality that "most kids don't" use tobacco. Involving youth in peer tobacco use prevention provides the meaningful involvement and proactive environment that can support the ability of youth to live up to their stated intention to not use tobacco products when they are older.

Appendix A

Student Tobacco Use and Perception Questionnaire

Appendix B

STUP Frequency Distributions
for High School Students and for Middle School Students

Q-1 (Cont'd)

D) Advertising/Counter advertising

	High Knowledge	←————→			Low Knowledge
	5	4	3	2	1
Before Workshop	37.5%	56.3%	6.3%	0.0%	0.0%
After Workshop	56.3%	43.8%	0.0%	0.0%	0.0%

E) Data on youth use of tobacco

	High Knowledge	←————→			Low Knowledge
	5	4	3	2	1
Before Workshop	17.6%	52.9%	17.6%	11.8%	0.0%
After Workshop	64.7%	35.3%	0.0%	0.0%	0.0%

F) Economics (cost) of tobacco use

	High Knowledge	←————→			Low Knowledge
	5	4	3	2	1
Before Workshop	18.8%	62.5%	12.5%	6.3%	0.0%
After Workshop	68.8%	25.0%	6.3%	0.0%	0.0%

G) Smoking myths and realities


	High Knowledge	←————→			Low Knowledge
	5	4	3	2	1
Before Workshop	31.3%	56.3%	12.5%	0.0%	0.0%
After Workshop	75.0%	25.0%	0.0%	0.0%	0.0%

H) Coping with anxiety


	High Knowledge	←————→			Low Knowledge
	5	4	3	2	1
Before Workshop	25.0%	56.3%	18.8%	0.0%	0.0%
After Workshop	81.3%	18.8%	0.0%	0.0%	0.0%

Q-1 (Cont'd)

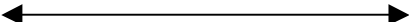
I) Behavioral rehearsal techniques

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	23.5%	35.3%	29.4%	11.8%	0.0%
After Workshop	70.6%	29.4%	0.0%	0.0%	0.0%


J) Social skills

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	31.3%	50.0%	18.8%	0.0%	0.0%
After Workshop	75.0%	25.0%	0.0%	0.0%	0.0%


K) Verbal/Non-verbal assertiveness skills

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	43.8%	37.5%	18.8%	0.0%	0.0%
After Workshop	75.0%	25.0%	0.0%	0.0%	0.0%

L) Resisting peer pressure

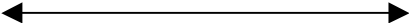
	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	43.8%	37.5%	0.0%	0.0%	0.0%
After Workshop	68.8%	31.3%	0.0%	0.0%	0.0%

M) Skills development


	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	18.8%	56.3%	18.8%	6.3%	0.0%
After Workshop	62.5%	37.5%	0.0%	0.0%	0.0%

Q-1 (Cont'd)


N) Curriculum materials and other resources

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	5.9%	35.3%	35.3%	11.8%	11.8%
After Workshop	64.7%	35.3%	0.0%	0.0%	0.0%


O-1) Policy issues - education for all students

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	29.4%	41.2%	11.8%	11.8%	5.9%
After Workshop	47.1%	29.4%	11.8%	11.8%	0.0%


O-2) Policy issues - campus-wide ban on tobacco

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	25.0%	37.5%	18.8%	12.5%	6.3%
After Workshop	31.3%	43.8%	18.8%	0.0%	6.3%

O-3) Policy issues - no use at all times for all persons

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	13.3%	40.0%	20.0%	20.0%	6.7%
After Workshop	28.6%	50.0%	7.1%	7.1%	7.1%

O-4) Policy issues - ban on tobacco advertising

	High Knowledge				Low Knowledge
	5	4	3	2	1
Before Workshop	18.8%	43.8%	12.5%	18.8%	6.3%
After Workshop	26.7%	40.0%	26.7%	0.0%	6.7%

Q-1 (Cont'd)

O-5) Policy issues - enforcement provisions

	High Knowledge	←————→			Low Knowledge
	5	4	3	2	1
Before Workshop	12.5%	50.0%	18.8%	12.5%	6.3%
After Workshop	25.0%	37.5%	25.0%	6.3%	6.3%

Q-2 **Now that you have participated in a comprehensive staff development workshop for tobacco use prevention for educators, how confident are you that you can:**

A) Present accurate information to students

	Completely Confident	←————→			Not At All Confident
	5	4	3	2	1
Response	47.1%	41.2%	11.8%	0.0%	0.0%

B) Answer student's questions about tobacco

	Completely Confident	←————→			Not At All Confident
	5	4	3	2	1
Response	47.1%	41.2%	11.8%	0.0%	0.0%

C) Help students to develop skills to refrain from using tobacco

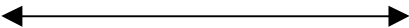
	Completely Confident	←————→			Not At All Confident
	5	4	3	2	1
Response	41.2%	58.8%	0.0%	0.0%	0.0%

D) Help students develop and use assertiveness skills

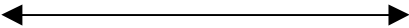
	Completely Confident	←————→			Not At All Confident
	5	4	3	2	1
Response	47.1%	52.9%	0.0%	0.0%	0.0%

Q-2 (Cont'd)

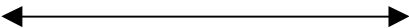
E) Help students reach a more accurate perception of youth tobacco use rates

	Completely Confident				Not At All Confident
	5	4	3	2	1
Response	64.7%	35.3%	0.0%	0.0%	0.0%

F) Convey the importance of tobacco-free schools policy to parents/decision makers

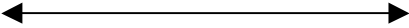
	Completely Confident				Not At All Confident
	5	4	3	2	1
Response	31.6%	52.6%	5.3%	10.5%	0.0%

G) Convey the importance of tobacco education to parents/decision makers

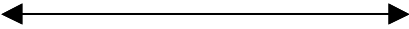
	Completely Confident				Not At All Confident
	5	4	3	2	1
Response	43.8%	50.0%	6.3%	0.0%	0.0%

Q-3 Listed below are potential barriers to implementing effective tobacco use prevention education in schools. Please rate the extent to which each potential barrier affects tobacco use prevention education in your school.

A) Lack of appropriate curricular materials


	Major Barrier				Not A Barrier
	5	4	3	2	1
Response	23.5%	11.8%	5.9%	41.2%	17.6%

B) Lack of staff expertise in teaching about tobacco use prevention


	Major Barrier				Not A Barrier
	5	4	3	2	1
Response	11.8%	17.6%	17.6%	47.1%	5.9%

Q-3 (Cont'd)


C) Difficulty integrating tobacco materials into curriculum

	Major Barrier					Not A Barrier
	5	4	3	2	1	
Response	29.4%	17.6%	5.9%	35.3%	11.8%	


D) Perceptions that youth are not at risk for tobacco-related diseases

	Major Barrier					Not A Barrier
	5	4	3	2	1	
Response	11.8%	35.3%	0.0%	29.4%	23.5%	


E) Parental resistance to tobacco use prevention education

	Major Barrier					Not A Barrier
	5	4	3	2	1	
Response	0.0%	5.9%	11.8%	29.4%	52.9%	

F) Concern that providing information will encourage tobacco use

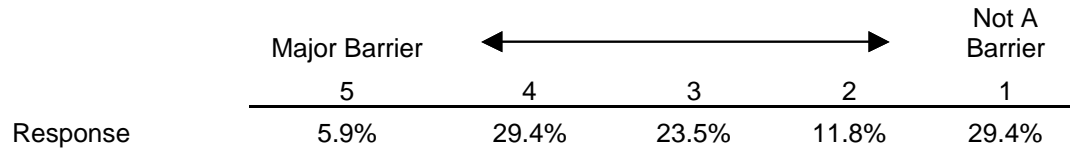
	Major Barrier					Not A Barrier
	5	4	3	2	1	
Response	0.0%	0.0%	29.4%	35.3%	35.3%	

G) Inadequate training and materials from the Office of Public Instruction

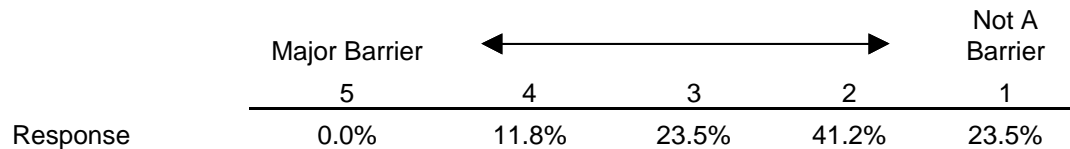
	Major Barrier					Not A Barrier
	5	4	3	2	1	
Response	0.0%	0.0%	5.9%	29.4%	64.7%	

Q-3 (Cont'd)

H) Lack of district or school guidelines or policy on tobacco education



I) Lack of staff comfort in teaching about tobacco use prevention



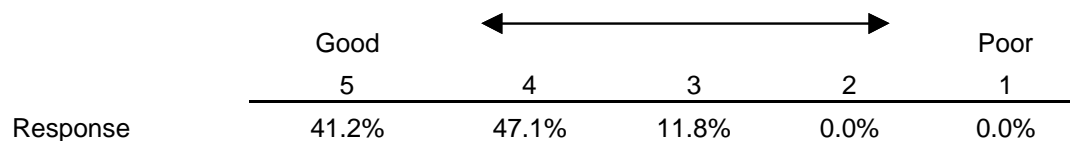
Q-4 Have you attended any other OPI-sponsored tobacco use prevention workshops in the past three years?

A) Yes 29.4%
B) No 70.6%

Q-5 Are you taking this workshop for teacher certification renewal units?

A) Yes 76.5%
B) No 23.5%

Q-6 Please rate your overall knowledge of tobacco use prevention



Q-7 Please rate your overall confidence/comfort level for providing tobacco information to students



Q-8 Please rate your overall confidence/comfort level for providing tobacco information to teachers, parents, and school decision makers

	Good				Poor
	5	4	3	2	1
Response	47.1%	41.2%	11.8%	0.0%	0.0%

Q-9A In what ways would you suggest the Office of Public Instruction assist you in removing barriers to presenting effective tobacco use prevention education?

Participant Responses

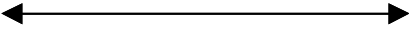
- 1) State Requirements, time, health environments.
- 2) Work with schools and community organization to adopt and enforce tobacco free policy.
- 3) Continue to lobby for curriculum funding.
- 4) Administrators, community and parent education.
- 5) Secure funding for a longer period of time.
- 6) Letters to administrators to tell them there is a trainer in their system and how lucky they are.
- 7) Good job so far.
- 8) Make a list of presenters or speakers that would be willing to speak to students.
- 9) Talking with administrators and parents.
- 10) Continue to offer training and materials.
- 11) This is a great beginning - thank you.
- 12) Assist in providing life skills to students, teachers, assist in perception awareness for parents.
- 13) Send any information regarding drug-free funding directly to the teacher and not the counselor.
- 14) Do a workshop for administrators of all levels in school district.
- 15) Send information to Superintendent and suggest they share with faculty and school board.
- 16) Integrate OPI programs with each individual district's health curriculum.

Q-9B What improvements or other topic areas do you think should have been covered in this workshop?

Participant Responses

- 1)What other books (life skills) looked like.
- 2)More statistics - more time.
- 3)Well Done.
- 4)Policy.
- 5)Resource or panel people.
- 6)More instruction on how to be a trainer.
- 7)Tobacco action (physiological).
- 8)More emphasis on facilitating.
- 9)Individual responsibility.

Q-10 How would you rate this workshop?

	Superior				Poor
	5	4	3	2	1
Overall Evaluation	58.8%	41.2%	0.0%	0.0%	0.0%
Information	70.6%	29.4%	0.0%	0.0%	0.0%
Materials	88.2%	11.8%	0.0%	0.0%	0.0%
Teaching Strategies	52.9%	47.1%	0.0%	0.0%	0.0%
Skills Practice	47.1%	47.1%	5.9%	0.0%	0.0%

property, at school functions, or in school publications; enforcement provisions for violation of the policy; and support for classroom-based instruction on tobacco use prevention, including training for teachers whose instructional duties include tobacco use prevention content.

8. Investigate collaborative tobacco use prevention education efforts with other state and community agencies and organizations.

- **Classroom Implementation:** Work toward the effective delivery of tobacco curricula and the integration of tobacco use prevention education within the context of comprehensive school health education in the classroom.
- **Involve Young People:** Involve youth in helping to realign tobacco use prevention education efforts to help assure that program efforts address the needs of youth.
- **Cessation:** Support tobacco use cessation efforts of local community agencies by helping to align existing cessation programs with local education agencies in order that access to cessation programs is available for all students and school staff who want to quit using tobacco.
- **Data Collection:** Conduct surveys to establish the health risk behaviors of youth regarding tobacco use and to determine the implementation level of tobacco use prevention education within the health enhancement program provided by local education agencies.
- **Evaluation:** Assess the work plan for school-based tobacco use prevention and education at regular intervals.

B. Proposed Program Work Activities

Proposed work activities to accomplish the above objectives include:

Policy

- Compile sample policies and information for guidance on developing appropriate tobacco-free school policies.
- Develop and distribute guidance on school policies.
- Assist school administrators and trustees in adopting tobacco-free school policies consistent with the recommendations in the CDC's *Guidelines for School Health Programs to Prevent Tobacco Use and Addiction*.
- Collaborate with community prevention coalitions, teachers, and students in promoting the adoption and implementation of appropriate and enforceable school policies.

Curriculum

- Assess school-based tobacco prevention resources for use as appropriate school-based interventions.
- Develop a tobacco-specific curriculum planning guideline.
- Coordinate and monitor grants to schools for funding the purchase and implementation of research-based tobacco use prevention curricula with credible evidence of effectiveness.
- Obtain pertinent information on tobacco prevention resources (such as resources available directly to state education agencies from the American Legacy Foundation).

- Provide information to schools on the availability of tobacco prevention resources (such as resources that local schools may apply for directly from the American Legacy Foundation).

Teacher Training

- Provide technical assistance to schools on tobacco prevention.
- Recruit and train regional trainers.
- Develop a work plan for regional trainers.
- Develop letters of agreement for regional trainers.
- Develop a statewide teacher training plan and implement teacher training in school-based teaching strategies with credible evidence of effectiveness.
- Evaluate the teacher training program .
- Present instructional strategies at the Health Enhancement Master Teacher program.
- Convene a regional trainers annual planning and problem resolution meeting.

Classroom Implementation

- Compile sample lesson plans as part of Health Enhancement model curriculum.
- Distribute sample lesson plans.
- Compile information and resources for tobacco specific curriculum planning guideline.
- Develop and distribute tobacco specific curriculum planning guideline.

Involve Young People

- Conduct baseline student perception survey with selected Health Enhancement teachers.
- Design the evaluation system for teacher training program to include student input.
- Conduct special studies of youth data.

Cessation Efforts

- Distribute applications for grants to local school district (with concurrence from DPHHS and only if funds are available); review and rate incoming applications.
- Award grants for tobacco prevention and access to cessation programs to local school districts.

Data Collection

- Interpret, and disseminate data findings of the YRBS, SHEP, and the student perception survey.
- Consider additional tobacco questions for the 2001 YRBS to include up to 10 additional questions related to tobacco use among youth.
- Conduct a one-year follow-up survey on student perceptions using selected Health Enhancement teachers.

Evaluation

- Design baseline program evaluation.
- Develop reports of student perception survey findings, SHEP 2000 findings, and tobacco-related YRBS findings.
- Report on status of tobacco-use prevention education.

- Develop program evaluation reports including assessment of school policy implementation, evaluation of teacher training, materials development, and final comprehensive program evaluation.

C. Proposed Work Activities for January - June 2000

Proposed work activities include:

- Receive personnel and operating budget funds from DPHHS.
- Hire an education specialist.
- Develop a program work plan consistent with the *CDC Guidelines for School Health Programs to Prevent Tobacco Use and Addiction*; provide a copy of the work plan to the DPHHS Tobacco Prevention and Control Program.
- Incorporate tobacco questions into the School Health Education Profile (SHEP) survey for school principals and lead health teachers if CDC develops modules for administrators and teachers and provides the modules to OPI in sufficient time to include them in the March 2000 administration date of the SHEP.
- Administer the SHEP (which may include SAS and LHES modules for additional tobacco-related information).
- Design baseline program evaluation.
- Design applications for grants to local school districts.
- Compile SHEP data.
- Conduct baseline student perception survey with selected health enhancement teachers.
- Compile sample policies; compile information for guidance on developing appropriate tobacco-free school policies.
- Distribute applications for grants to local school districts (with concurrence from DPHHS and only if funds are available); review and rate incoming applications.
- Compile sample lesson plans as part of the Health Enhancement model curriculum for grades K-12.
- Present instructional strategies at the HEMT program.
- Develop a progress report on program activity for the period January 1, 2000 through May 30, 2000 (this report will be due not later than June 30, 2000).

D. Work Activities Accomplished during January - June 2000

- Receive personnel and operating budget funds from DPHHS

Progress Report: Funds for personnel and the operating budget were received from DPHHS.

- Hire education specialist

Progress Report: An education specialist was recruited and hired. The effective date of work was March 1, 2000.

- Develop a program work plan consistent with the *CDC Guidelines for School Health Programs to Prevent Tobacco Use and Addiction*; provide a copy of the work plan to the DPHHS Tobacco Prevention and Control Program.

Progress Report: The program work plan was developed and submitted to the DPHHS in March 2000. The work plan is consistent with the CDC guidelines for school-based efforts to prevent tobacco use and addiction.

- Incorporate tobacco questions into the School Health Education Profile (SHEP) survey for school principals and lead health teachers if CDC develops modules for administrators and teachers and provides the modules to the OPI in sufficient time to include them in the March 2000 administration date of the SHEP

Progress Report: OPI staff and survey contractor (Dodge Data, Inc.) collaborated to include additional tobacco questions into the CDC-developed tobacco modules for school principals and lead health enhancement teachers. The SHEP was distributed to all schools with grade 6 and above and an enrollment of at least 25 students. Approximately 70 percent of the forms were returned. (Note: Past SHEP surveys have had a 90 percent return rate. Several schools reported that they did not do the survey this year due to its length, which nearly doubled in size due to the added tobacco module.) The SHEP was administered during March 2000.

- Administer the SHEP (which may include SAS and LHES modules for additional tobacco-related information)

Progress Report: The SHEP survey was administered March 2000. The additional tobacco modules for school administrators and lead health educators were included.

- Design baseline program evaluation

Progress Report: OPI staff developed a four-part evaluation plan for program evaluation. The four parts of the evaluation plan address: 1) policy and curriculum, 2) staff development, 3) student risk behavior and perceptions, and 4) program accomplishment.

- Design applications for grants to local school districts

Progress Report: OPI staff developed the tobacco grant application and application procedures to provide the mechanism for Montana school districts to apply for school-based tobacco prevention grants. The applications included award criteria and specific directions for completing the application form. The application provided for three types of grant awards -- regional consortium, schools of excellence, and greatest need.

- Compile SHEP data

Progress Report: The tobacco education specialist is working with the OPI's survey contractor (Dodge Data, Inc.) to compile the survey data. Results and findings are expected to be available by September 2000.

- Conduct baseline student perception survey with selected health enhancement teachers

Progress Report: The student perception survey was conducted in April 2000. The initial results have been compiled and are being reviewed. The results have been aggregated into three groups – all students, high school students, and middle school students. The non-random survey sample was 543 students (219 high school students and 324 middle school students).

- Compile sample policies; compile information for guidance on developing appropriate tobacco-free school policies

Progress Report: A model policy guidance document is being developed. The guidance will be consistent with the recommendations in the CDC's *Guidelines for School Health Programs to Prevent Tobacco Use and Addiction*. Local school district policy, provided on a volunteer basis, will be examined against the criteria listed in the CDC's *Guidelines for School Health Programs to Prevent Tobacco Use and Addiction* to be used as samples of model policy.

A meeting was held with Jane Pritzl, CDC/DASH tobacco policy specialist, to gather resources and other pertinent information for the development of appropriate tobacco-free policies.

- Distribute applications for grants to local school districts (with concurrence from DPHHS and only if funds are available); review and rate incoming applications

Progress Report: Grant applications were distributed to local school districts on April 3, 2000. OPI staff provided on-site, teleconference and telephone technical assistance in explaining the application, application process, use of funds, and required program components.

OPI staff assembled a peer-review committee to review and rate the grant applications. Schools will be notified by June 30, 2000 of their award and any conditions to the award. All awards are conditional approvals requiring each applicant to submit additional materials before funds will be released.

- Compile sample lesson plans as part of the Health Enhancement model curriculum for grades K-12

Progress Report: Tobacco-specific lesson plans from the Health Enhancement model curriculum have been assembled into a Tobacco Use Prevention and Education K-12 Lesson Plans booklet. These lessons will be distributed to participants in tobacco use prevention education workshops OPI will offer to teachers during the upcoming school year.

A workshop was held to train teachers in the use of the Life Skills® Curriculum. This program will provide teachers with additional activities to be implemented in the classroom when teaching tobacco use prevention education.

The intent of the OPI is to use Life Skills® and Project ALERT® when offering regional workshops across the state. The workshops will provide participants with methods and materials to address tobacco use prevention education in their classrooms. The K-12 lessons will be a valuable resource for teachers attending a regional workshop.

- Present instructional strategies at the HEMT program

Progress Report: A presentation was delivered to the Health Enhancement Master Teacher (HEMT) program participants. The HEMT program is sponsored by OPI and is offered as a graduate credit course at MSU-Bozeman. Instructors for the course include OPI staff from the Health Enhancement Division. The course section on tobacco served as a source of resources in addition to being a source of instructional strategies.

- Develop a progress report on program activity for the period January 1, 2000 through May 30, 2000 (this report will be due not later than June 30, 2000)

Progress Report: The report has been developed. It addresses program activities from the work plan for the period January 1 - May 30, 2000.

- Other Activities

Progress Report: OPI staff attended a collaborative meeting between tobacco specialists from DPHHS and a representative of the Montana Tobacco Use Prevention Resource Center to discuss resources and an upcoming community coalition meeting.

OPI staff attended the Governor's Advisory Council meeting and presented an overview of the school-based work plan.

OPI staff attended a community-based Tobacco Coalition meeting and presented an overview of the school-based work plan.

OPI staff met with other DPHHS contractors at a meeting of contractors per DPHHS request to be in attendance.

E. Teacher Training Program Evaluation

A key element of integrating tobacco use prevention education into school curricula is through the development of the teacher training program. This program will

use regional trainers to train classroom teachers on strategies and methods of disseminating tobacco use prevention information. It should be noted that regional trainers must demonstrate exceptional knowledge of basic tobacco use prevention information, policy issues, school methodology, curriculum development and design, and strategies to integrate tobacco use prevention education into a coordinated and comprehensive health curriculum (i.e., the Health Enhancement curriculum).

The objectives of the state-level and regional teacher training workshops are nearly identical, with some adjustment depending on the participants. Principal objectives for comprehensive workshops are to:

1. increase knowledge and skills to teach effectively about tobacco use prevention;
2. increase comfort level and competency in teaching about tobacco use prevention;
3. use a step-by-step approach to practice developing, conducting, and evaluating teacher training on tobacco use prevention;
4. understand basic components of effective training design, including needs assessment, objectives, design, training management checklists and adult learning theory;
5. learn skills for effective group management and leadership;
6. clarify roles as trainers for tobacco use prevention education;
7. be able to identify the trainer's own values and attitudes related to tobacco use prevention and to promote respect for cultural and attitudinal diversity;
8. be able to experience a wide range of teaching and learning techniques;
9. acquire skills in handling controversial aspects of tobacco use; and

10. observe and critique a sample tobacco use prevention teacher training session.

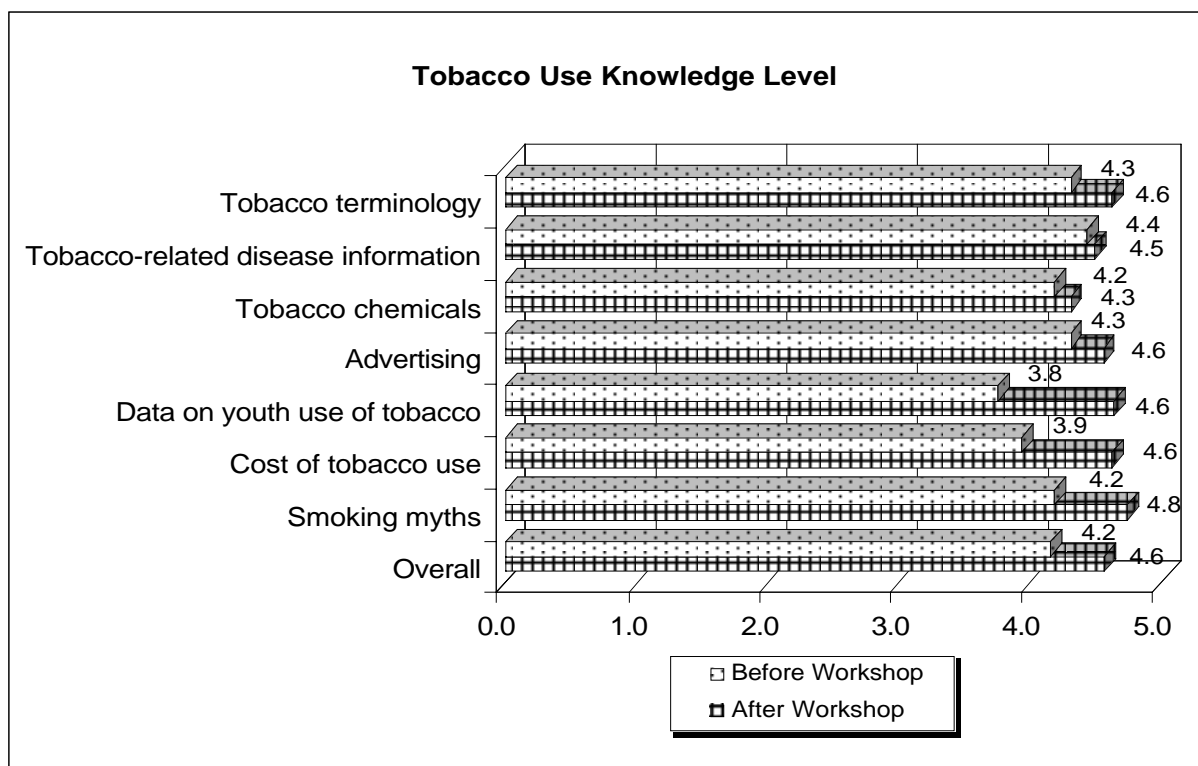
A training workshop was held in June 2000 to “train the trainers” so that they could, in turn, train classroom teachers in their geographical areas on how to effectively deliver tobacco use prevention information and skills to Montana students. A formative evaluation process was developed and the following sources of information were used to evaluate the trainer workshop: 1) direct observation; 2) pre and post-training surveys related to knowledge of tobacco use prevention issues and to confidence in ability to carry out key component activities of a successful tobacco use prevention education project; 3) a perceived barrier inventory administered after the training sessions; and 4) an overall evaluation by the trainees of the workshop. The results of the evaluation process are presented in the following sections of this report.

1) Prevention Information, Skills, and Policy Knowledge Inventory.

Workshop participants were asked about the level of their knowledge **before** and **after** the workshop regarding tobacco use prevention information, teaching skills development and policy issues. Knowledge levels were rated from 5 (high degree of knowledge) to 1 (low degree of knowledge) for all questions in the knowledge inventory. Primary tobacco use prevention information topics included tobacco use prevention terminology, tobacco use prevention disease information, tobacco chemicals, advertising, data on youth use of tobacco, cost of tobacco use, and smoking myths. Participants rated their overall knowledge of primary topics at 4.2 before the workshop and 4.6 after the workshop (Figure 1 and Appendix A, pages A1 and A2), which indicates that participants felt there was an overall knowledge gain in primary tobacco use prevention information from the workshops (a 10 percent gain in knowledge). The

trainers participating in this workshop were selected because of interest and knowledge levels in tobacco use prevention, thus, a 10 percent gain in knowledge among this group should be considered good.

FIGURE 1
TOBACCO USE PREVENTION INFORMATION KNOWLEDGE GAIN

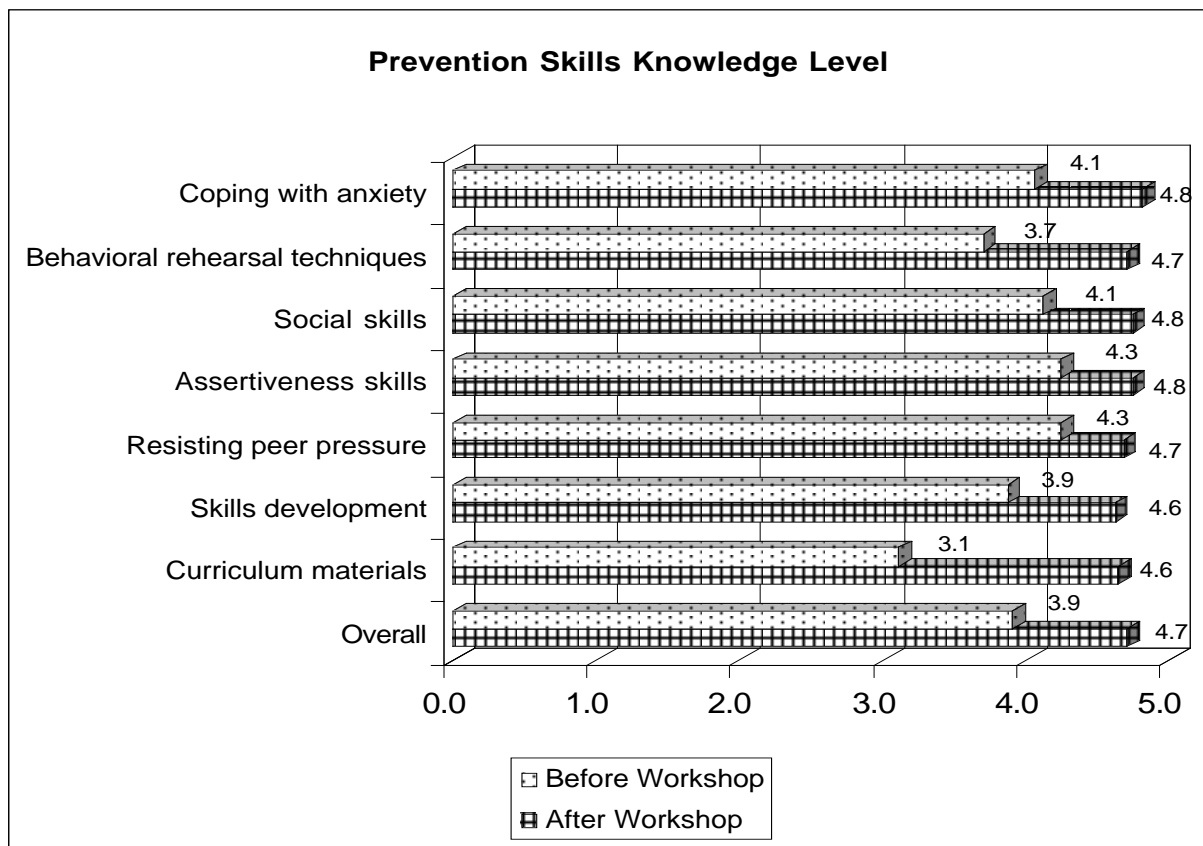


High knowledge gains in individual primary topics were reported with data on youth use of tobacco (23 percent knowledge gain); cost of tobacco use (18 percent knowledge gain); and with smoking myths (10 percent knowledge gain). Lesser primary knowledge gains were reported with tobacco use terminology, tobacco related disease information, tobacco chemicals, and tobacco advertising. However, participants felt that their levels of knowledge related to these knowledge categories was substantial before the workshop, since these three primary components were the highest knowledge levels reported both before and after the workshop.

Tobacco use prevention skills topic knowledge included coping with anxiety, behavioral rehearsal techniques, developing social skills, developing assertiveness skills, resisting peer pressure, skills development, and the use of curriculum materials. Participants rated their overall knowledge of skills development topics at 3.9 before the workshop and 4.7 following the workshop (Figure 2 and Appendix A, pages A2 and A3), which indicates that participants felt there was significant overall knowledge gained in tobacco use prevention skills knowledge from the workshop (a 21 percent knowledge gain).

FIGURE 2
SKILLS TOPIC KNOWLEDGE GAIN

High knowledge gains in individual skill topics were reported in curriculum materials (48 percent knowledge gain), skills development (18 percent knowledge gain),

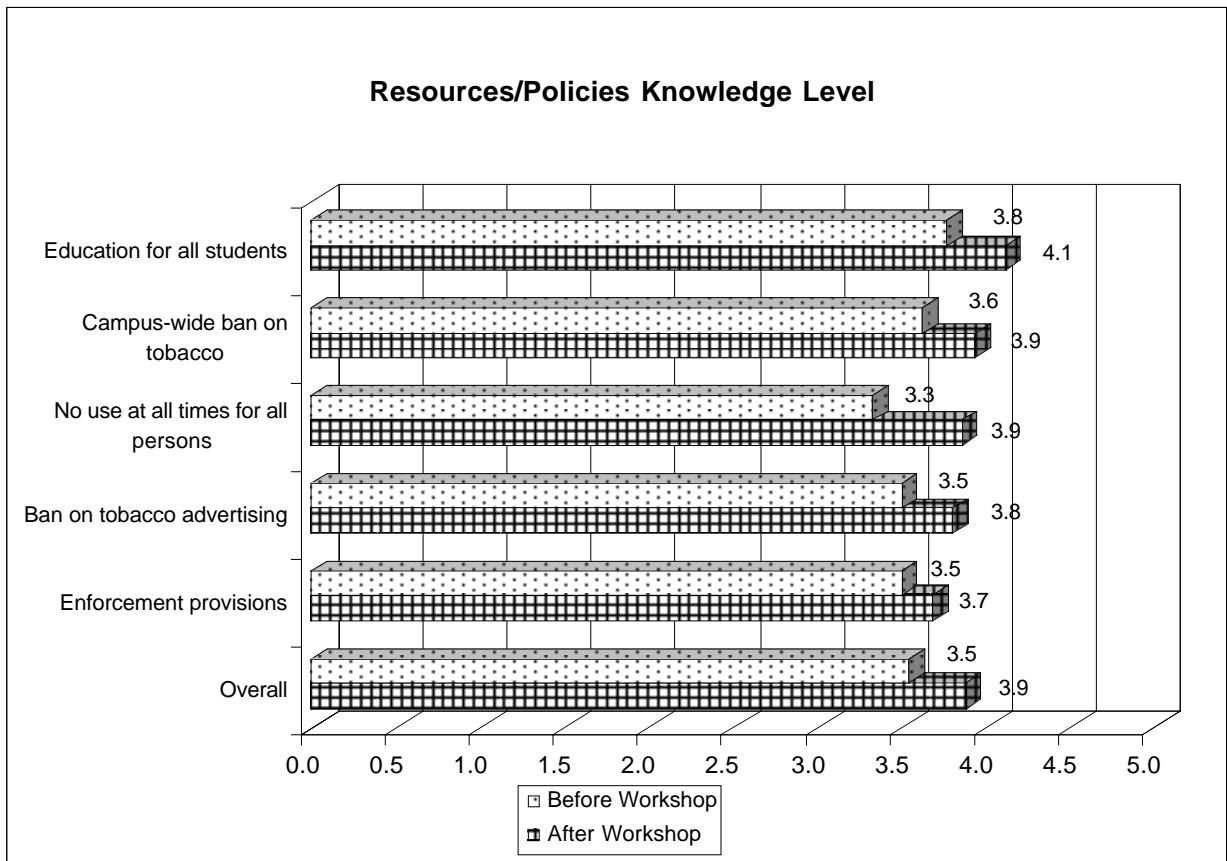


and behavioral rehearsal techniques (27 percent knowledge gain). Lesser skill knowledge gains were reported in coping with anxiety, social skills, assertiveness skills, and resisting peer pressure. In many of these categories, the before workshop knowledge levels were already quite high. For example, trainers rated their knowledge of skills involved in resisting peer pressure and assertiveness skills before the workshop at a level of 4.3.

Knowledge of policy issues included information on education for all students, campus-wide ban on tobacco products, no use at all times for all persons, ban on tobacco advertising, and enforcement provisions. Participants rated their overall knowledge of policy issues at 3.5 before the workshop and 3.9 following the workshop (Figure 3 and Appendix A, pages A3 and A4), which indicates that participants felt there was an overall knowledge gain in primary tobacco use prevention information from the workshops (an 11 percent gain in knowledge).

Knowledge gains were about equal for all policy issues. The gains reported were highest for “no use at all times for all persons” while the smallest gain in knowledge related to “enforcement provisions.” Participants rated the policy issues topic areas the lowest of all information topics and felt that the knowledge gained from the workshop was the least of all topic areas.

FIGURE 3
TOBACCO USE PREVENTION
RESOURCES/POLICIES KNOWLEDGE COMPONENTS



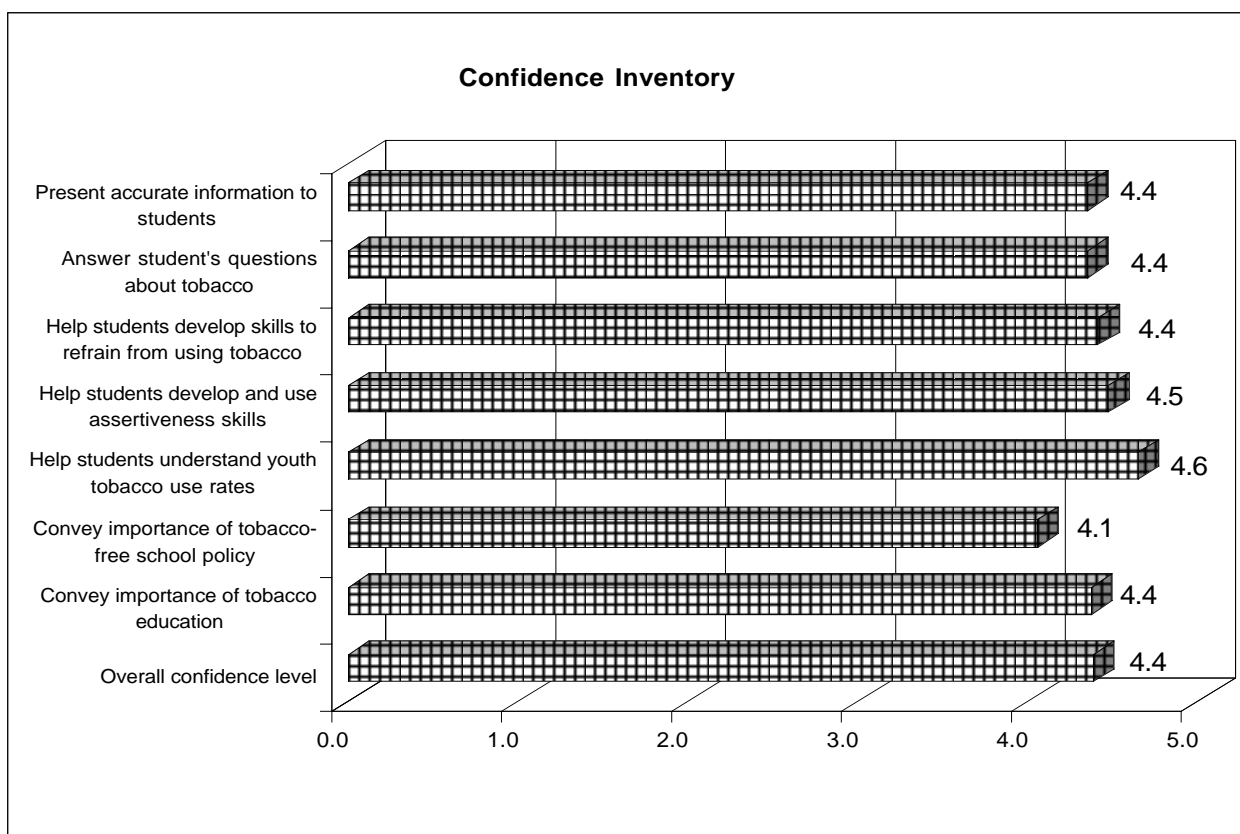
2) Tobacco Use Prevention Educator Ability Inventory. Success in providing effective tobacco use prevention education requires more than knowledge about tobacco use prevention. It also requires educators to be confident in their ability to provide students with an effective instructional program.

The confidence inventory consisted of a six-question survey that was administered to workshop participants after the training session. Respondents were asked to assess self-confidence in their ability to carry out activities that are key components of all successful tobacco use prevention education programs. Participants

were asked to rank their perceived confidence on a scale from 1 to 5, with 5 being completely confident and 1 being not at all confident.

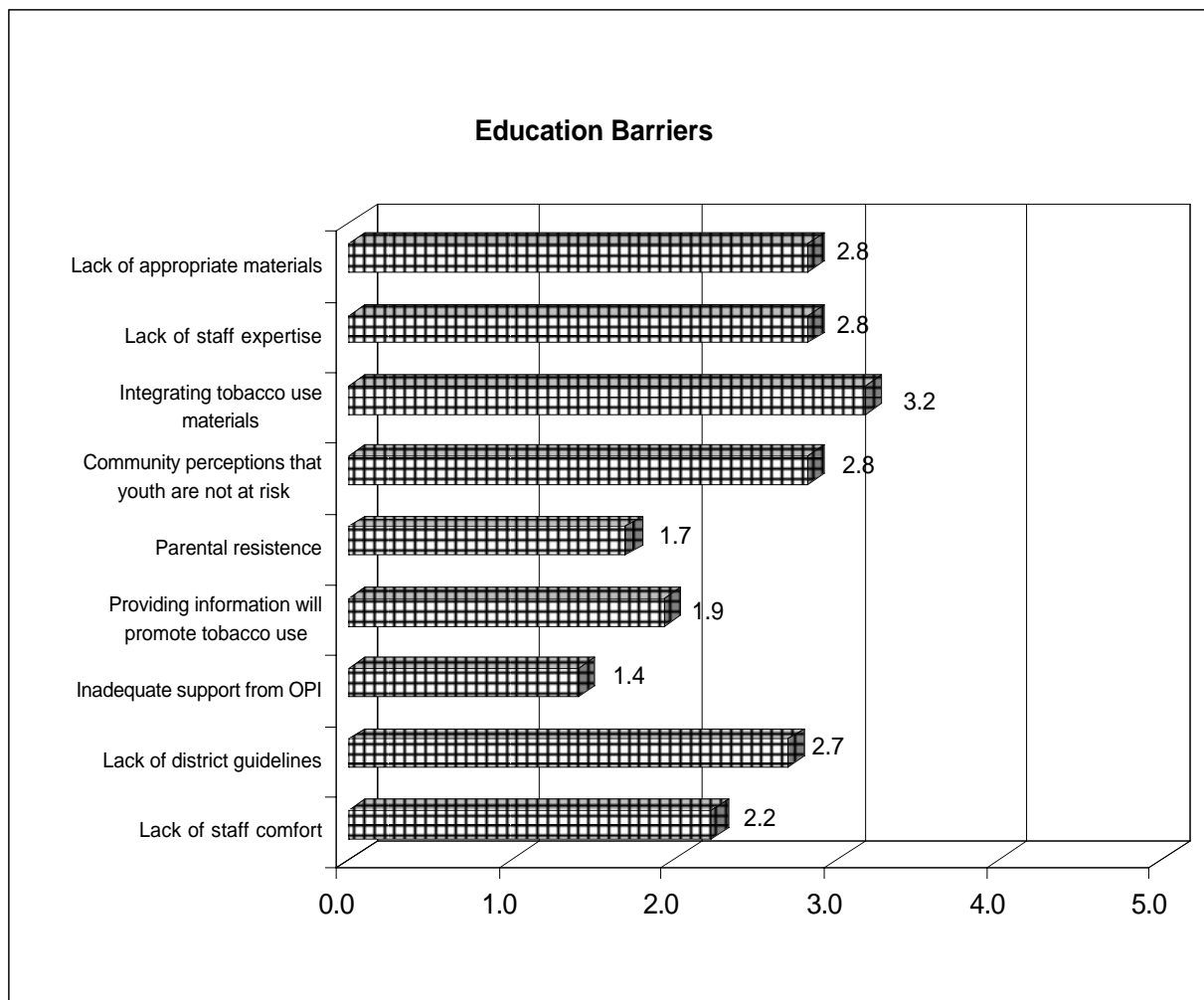
Comparison of the survey results indicated that, following the training sessions, most workshop participants had strong confidence in their ability to carry out the listed activities (Figure 4 and Appendix A, pages A5 and A6). The overall confidence level listed for all categories was 4.4 (on the 5 scale), which indicates a strong confidence in the workshop participants' abilities to deliver quality tobacco use prevention related education. The highest degree of confidence was exhibited in the workshop participants' abilities to help students reach a more accurate perception of youth tobacco use rates (4.6 rating) and to help students develop and use assertiveness skills (4.5 rating).

FIGURE 4
TOBACCO USE PREVENTION EDUCATION ABILITY INVENTORY



3) Tobacco Use Prevention Education Barrier Inventory. Workshop participants were asked to rate the degree to which various potential barriers were present and that prevented implementation of effective tobacco use prevention education in their individual school districts. Nine potential barriers were listed and respondents were asked to rank the potential barriers from 5 (major barrier) to 1 (not a barrier). Figure 5 lists the results of the survey as reported by workshop participants.

**FIGURE 5
TOBACCO USE PREVENTION EDUCATION BARRIERS**



The most significant barriers, as seen by the workshop participants, were the difficulty integrating tobacco materials into an already saturated curriculum; community perceptions that youth are not at risk from tobacco use; lack of staff expertise; and the lack of district guidelines or policy on tobacco education.

None of the barriers listed were rated as being major barriers, as the overall rating was 2.1 (less than midway between 5 as a major barrier and 1 as not being a barrier). The potential barrier rated the lowest was inadequate support from the Montana Office of Public Instruction -- apparently, most workshop participants felt that the OPI was doing its part in implementing effective tobacco use prevention.

4) General Questions. At the conclusion of each workshop, several general questions related to tobacco use prevention education and training were asked of all workshop participants. Nearly one-third (29 percent) of the workshop participants had attended other OPI-sponsored tobacco use prevention workshops in the past three years. Seventy-seven percent of the participants indicated that they were taking the training sessions for teacher certification renewal credits.

When asked to rate their post-workshop overall knowledge and confidence levels (on a scale from a high of 5 to a low of 1), participants felt that they were highly knowledgeable (average ranking was 4.4) and quite confident (4.5 average ranking). These levels are substantiated by the rankings in the individual areas presented earlier in this report.

Open-ended questions were asked regarding how the OPI could assist in removing barriers to presenting effective tobacco use prevention education, and what other topic areas could have been covered in the workshops. Most of the comments regarding additional OPI assistance in removing potential barriers were related to

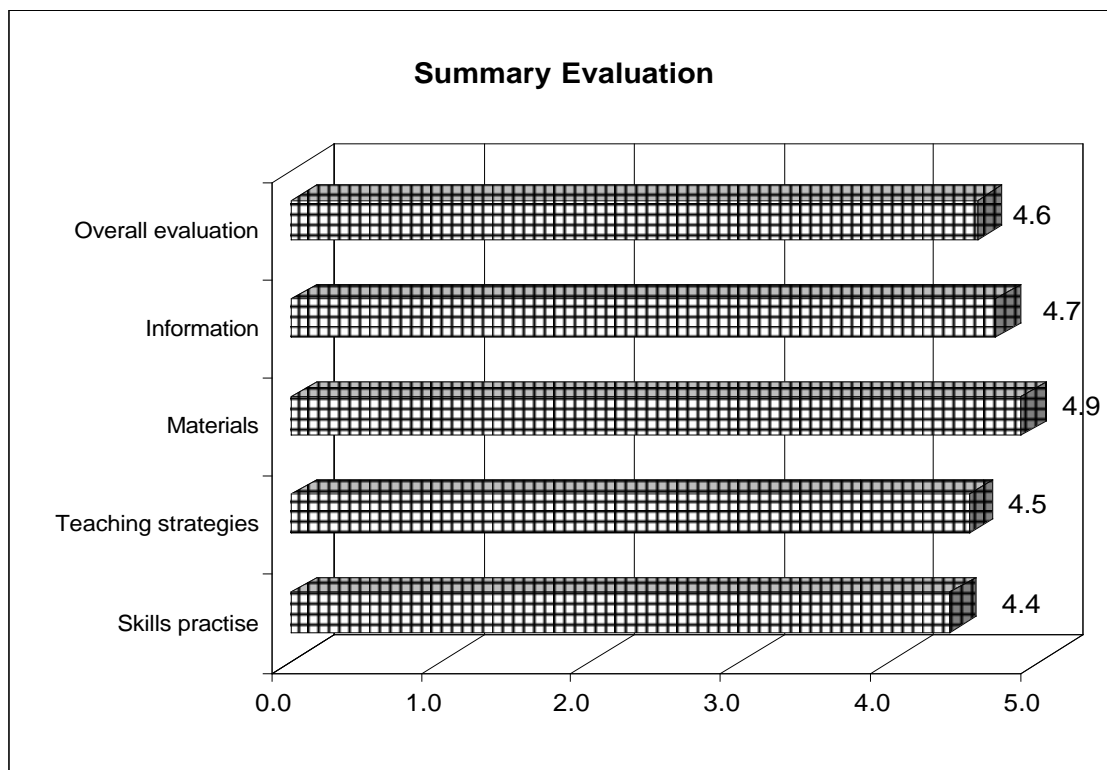
expanding the workshops and expanding information delivered by the OPI to include communities, school boards, and students (Appendix A, pages A6 and A7). Other comments included making more information available, and continuing the current workshops.

When queried as to what other topics should have been covered in the workshops, respondents most often mentioned additional materials and making more time available to conduct the workshops (Appendix A, pages A8 and A9). Many comments were complimentary in nature, and encouraged continued offering of the workshops.

5) Workshop Evaluations. The training session was evaluated by the participants using a summary evaluation form (Appendix A, page A10). Workshop participants were asked to rate the workshop with respect to: 1) an overall evaluation; 2) information; 3) materials; 4) teaching strategies; and 5) skills practice.

All components of the workshops were rated above average to superior (Figure 6 and Appendix A, page A14). Overall, the training sessions received a 4.6 rating on a 5-point scale (5 was superior). Teaching materials received the highest rating of 4.9, while skills practiced received the lowest rating of 4.4. None of the workshop participants thought any of the workshop components were average or below average.

FIGURE 6
TOBACCO USE PREVENTION EDUCATION SUMMARY EVALUATION



trainers in June 2000. Appendix B includes the results of the Student Use and Perception Survey.

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